



State of New Hampshire

PUBLIC EMPLOYEE LABOR RELATIONS BOARD

PETITION FOR DECERTIFICATION

Original and five (5) copies should be filed with the Executive Director of the Public Employee Labor Relations Board at GAA Plaza, Building No. 1, 153 Manchester Street, Concord, New Hampshire 03301. Agency web-site WWW.NH.GOV/PELRB

AGENCY USE ONLY

CASE NO: _____

DATE FILED: _____

1. PETITIONER: _____
Representative: _____ Title: _____
Address: _____
E-Mail Address: _____ Telephone () _____
Fax Number: _____
2. PUBLIC EMPLOYER: _____
Representative: _____ Title: _____
Address: _____
E-Mail Address: _____ Telephone () _____
Fax Number: _____
3. EXCLUSIVE REPRESENTATIVE: _____
Representative: _____ Title: _____
Address: _____
E-Mail Address: _____ Telephone () _____
Fax Number: _____
4. NUMBER IN UNIT _____ (Total)
5. COMPOSITION OF CERTIFIED UNIT: _____

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6. **EXCLUSIONS:**
(SUPERVISORY) _____

(CONFIDENTIAL) _____

7. **BUDGET SUBMISSION DATE:** _____
8. **EXISTING AGREEMENT DATES:** _____
9. **AS REQUIRED BY PUB 301.03 (A), INDIVIDUAL PETITION CARDS, BEARING THE SIGNATURE AND TYPEWRITTEN OR PRINTED NAME OF EMPLOYEES, AND EVIDENCING THE REQUISITE 30% SHOWING OF INTEREST, SHALL BE INCLUDED WITH THIS PETITION.**

(Signed) BY: _____
FOR: _____

Dated this _____ day of _____, _____.

CERTIFICATION

I certify that a copy of the instant petition has been hand delivered, or mailed certified mail, this day to:

(Exclusive Representative)

and to: _____
(Public Employer)

(Signed) _____

Date: _____

10. **EXCEPTIONS to this decertification petition must be filed with the Public Employee Labor Relations Board, GAA Plaza, Bldg. #1, 153 Manchester Street, Concord, New Hampshire 03301, within fifteen (15) days of the date of filing this petition.**